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ON THE MEDICAL TREATMENT

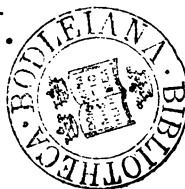
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INSANITY.

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OBSERVATIONS
ON THE
MEDICAL TREATMENT
OF
INSANITY.



BY
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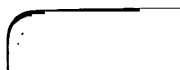
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ON THE MEDICAL TREATMENT

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THE learned physician who delivered the Croonian lectures during the last two years, entered very fully into the investigation of those diseases of the brain which arise from, or are attended with, alterations of structure; and traced with great accuracy and clearness the changes which the improved observations of modern times have detected in this viscus. Difficult as such a task undoubtedly was, it falls short of that which my sense of duty has imposed upon myself—the continuation of investigation of diseases of the sensorium arising from the disturbance of its intellectual perceptions, either actually commencing in the brain itself, or, secondarily, from the extraordinary sympathy of that organ with viscera in the other cavities of the body. With such an object, it is needless for me to claim indulgence; the extreme

difficulty of the inquiry, and the darkness in which it is enveloped, must be felt by all. Unfortunately, likewise, the difficulties are greatly increased by this department of science having been left almost exclusively, in this country, to medical men who resign the care of other diseases, and, with few and eminent exceptions, lose the power of investigating the aberrations of intellect in conjunction with the other functional diseases of the human frame. It is my anxious wish to place before the College an outline of the labours of others; and, in these and the succeeding lectures, to analyse what has been recommended with a view to simplify our knowledge of causes, and to determine upon what cases are, and what cases are not, remediable in the present state of the medical art. The hopeless nature of many cases of insanity, the severity of others, and perhaps the necessity for seclusion, have induced physicians very generally to resign all hopes of applying, successfully, means of cure, which may be said, in other diseases, to give all but life itself.

These feelings have been strengthened by the unhappy prevalence of insanity in several members of the same family. This predisposition disheartens the physician; he is hopeless that the disorder of the intellect should have arisen without any change of structure from sympathy with

other diseases of the body. He approaches the subject with awe, rather than with a spirit of inquiry, and consigns, in despair, the patient to a living tomb.

Still, under judicious care and treatment, persons recover even from the most extreme instances of aberration, and in no mean proportion; in fact, in a proportion which ought to stimulate physicians, so far from abandoning their patients, to use every resource resulting from their observation, and derived from their art. To exemplify my meaning, I may take the cures in Mr. Warburton's establishment, the White House on Bethnal Green; a house where the arrangement, order, and attention, are highly deserving of praise, and which contains 400 lunatics, comprising persons in every stage and variety of this afflicting malady. It is to be observed that many of these cases are paupers, received after a probationary sojourn in the parish infirmary, and not unfrequently dismissed uncured, after the year's trial, from Bethlehem or St. Luke's. In the year 1829, of two hundred persons admitted into the White-House, fifty were discharged cured in the course of the same year; and, creditable as such a fact is to the establishment, it is still more important to medical men, as one which may rouse them to use all their

energies in the treatment of a disease which may and can be cured.

Do we see the extreme of this disease,—the patient raving, unconscious to the calls of nature, or, if conscious, only indulging in habits abhorrent even to the brute creation—deprived not only of the mind of an immortal being, but even of that instinct which supplies its place among the lower animals,—yet such cases are curable. The following instance is related by Mr. Finch, a medical man, and the proprietor of a house for lunatics, at Laverstock, near Salisbury, in his evidence before the Committee of the House of Commons, in 1816 :—“ I can give you (says Mr. Finch) a very strong case of a patient I had from St. Luke’s: he was a man of opulence, sent there as a pauper; he came to me afterwards as a gentleman. This man came to me a most miserable object from St. Luke’s, after having been there a twelvemonth, and discharged as incurable: he was so bad that he had lost nearly the use of his limbs: he walked upon his toes; he could scarcely get from the coach to my house; the muscles of his legs were contracted; he was so nasty in himself that he ate his own fæces, and would his own flesh, if he had not been prevented; he tore it immediately, as he came to me. I had to put him into a room

where he could do no mischief to himself or any one else, but took off every restraint: I found him within a few days more composed. Some little time afterwards he became so bad again, that I was obliged to use some restraint, so as to prevent his eating his own fæces. From having a man attending him two or three times every day to the privy, his disposition to filth was lessened; by attending to his bowels, and keeping him strongly exercised in the gardens and fields, I found him gaining strength daily; within six weeks, capable of playing at bowls; and I sent him home perfectly restored in four months, where he carried on the business of a coach-proprietor for three years afterwards."

I am happy to avail myself here of the testimony of the most experienced practical physician of our country.

Sir H. Halford says, in his evidence before the House of Commons, in 1816:—

"If medicine be less useful in the confirmed periods of insanity, it is as little so in the advanced stages of other chronic diseases. In cases of incapacity of the joints, with painful swellings upon them, from chalk stones, after repeated fits of the gout, medicine has no effect upon these depositions; yet this is no argument

against the use of medicine in the first attacks of gout, to prevent such dismemberment and deformity. Again, in the instance of palsy, when a patient has lost the half of his body; in this stage of the complaint medicine has very little sensible effect upon it; but, if the patient be assisted in the earliest attack of the malady, whilst under apoplexy, which generally precedes palsy, not only may his life possibly be saved, but the paralytic symptoms prevented altogether, or, at least, considerably mitigated. But we have much to learn on the subject of mental derangement; and I am of opinion, that our knowledge of insanity has not kept pace with our knowledge of other distempers, from the habit we find established, of transferring patients under this malady, as soon as it has declared itself, to the care of persons who too frequently limit their attention to the mere personal security of their patients, without attempting to assist them by the resources of medicine. We find facts in the history of this disease, and if they are carefully recorded under the observation of enlightened physicians, no doubt they will sooner or later be collected in sufficient number to admit of safe and useful inductions."

Nor is time always conclusive: solitary instances of cure have occurred after uninterrupted insanity of ten years. But it may be said, and

often has been said, that the young and inexperienced in our profession alone believe in the efficacy of medical treatment to cure mental derangement: a little experience would convince them that such disorders are altogether incurable; and it is not unfrequent to hear any hint at treatment met by the observation—"It is quite useless: all these cases arise from organic disease; and does any man pretend to cure organic disease of the brain?" All the powerful agents which we possess to diminish excitement, soothe and allay irritability, reduce temporarily increased sensibility, or relax inordinate muscular power, in other diseases, are to be abandoned here, from a consciousness of the difficulty of permanent cure.

Long since, the division of those cases of insanity which spring from physical or moral causes, has been made by attentive observers; and in considering the subject, it is a division of great practical importance. Under insanity from physical causes, are comprised those cases which arise in conjunction with alteration of structure in the brain itself, in the viscera of the thorax or abdomen, or with alteration of the functions of the brain, dependant on altered functions of the genital or biliary systems, &c.

In the class of insanity from moral causes are included those which arise from hereditary

predisposition, acted on by the influence of the depressing or exciting passions suddenly or intensely produced; the influence of that mis-called religion which addressses itself to the fears rather than the hopes of man, and the sudden alternations of emotion, which the complicated interests and numerous cares of civilized life produce.

It is proposed first to investigate the alterations of structure which have been noticed by authors whose great opportunities of observation entitle them to our confidence, as occurring on opening the bodies of lunatics. Nothing probably is more difficult than to estimate the exact worth of such alterations in structure. Every one who has studied morbid anatomy must have been struck with the amazing extent to which disorganization of the brain may be carried, without the intellectual functions being impaired. Great and intense pain exists in the brain for months; it is occasionally accompanied by vomiting, followed by diminution of the perfection of the external senses; there is dimness of sight or deafness; the smell is morbidly acute; paralysis follows. On opening the brain tumours are found, either scrofulous or malignant, in its substance; yet, from the commencement to the conclusion of the disease, the mind has never varied, the patient has not suffered in perception or volition, her affection for her family has been

unimpaired, she has been capable of consulting on affairs of importance, and able to enter into and receive comfort from the highest duties of religion: and this is no hypothetical case. Is it not bold, therefore, to assert, that where none of these signs of physical infirmity exist,—where there is neither depraved sense, nor diminished motion nor sensation, but where a train of incoherent ideas, shuddering fear, or extravagant ecstasy, or gloomy pride are present,—that it is useless to apply to the art of medicine, for these probably depend on organic disease? Even where, after death, slight deviation from the ordinary appearance of the brain or its vessels is found, it is very necessary to be cautious in forming an opinion; for similar appearances exist in cases which have never shewn symptoms of aberration of intellect.

In the cases related by Dr. Haslam—and I purposely choose examples from those authors who have had undoubted means of observation—the appearances described after death are by no means convincing of the physical nature of the disease. Persons who carefully observe dissections of patients dying of different diseases, will be struck by the variety of thickness or thinness in the bones of the skull, and the variation in the degree of firmness or softness of the brain, dependant on the season, the length of time during which the patient has been dying, and on age;

and such great variation occurring in cases in which no alteration of perception had existed during the life of the patient. The same may be said of the presence of vesicles in the choroid plexus: such bodies being found occasionally in maniacal cases, by no means proves that the malady owed its origin to this deviation from natural structure, since they exist very frequently, and to a great extent, without the functions of the brain apparently suffering. There is perhaps, however, no appearance on which so much stress has been laid as on congestion of the vessels of the head; the mechanical physician having his scruples satisfied by a very slight injection of the vessels of the brain, while the morbid anatomist must have observed almost every variety of intensity of this appearance, often unattended by corresponding symptoms of excitement, or disturbance of the brain during life. Of effusions into the ventricles of the brain the same may be said: fluid is undoubtedly present in a healthy condition, as may be, and has been, proved on dissection of living animals, and it probably varies in different animals, according as their life is more perfect—large, strong, and lively animals having a larger proportion than those in a weakly or pining condition. It has repeatedly occurred to me to witness a few drachms of fluid in the ventricles assigned as the cause of death, when I have immediately afterwards observed

in the dead-house of the hospital twice the quantity, in cases where the patients had died of inflammation of the viscera of the abdomen, or some other disease, with which, visibly at least, the functions of the brain had not sympathized during life. It is remarkable that in that particular alteration of the structure of the brain which principally occurs in aged people, and to which the French pathologists have given the name of *ramollissement du cerveau*, in the numerous cases related by M. Rostan, almost all of which occurred in persons above fifty years of age, notwithstanding the frequent alteration of sensation and motion, and the still more frequent change in the external senses, the intellectual faculties often remained unchanged.

Various observers in various countries have, however, adopted views of the local or material cause of insanity. In this country physicians generally incline to the belief that congestion of the brain is the immediate cause, or thickening of the membranes, especially of the arachnoid membrane, or preternatural thickness of the bones of the skull; others, on the Continent more especially, have been more precise, one author having frequently observed calcareous matter in the pineal gland. Meckel speaks of the preternatural hardness of the corpora striata in cases of melancholy: Gall considers that the crura

cerebri, and the corpus callosum, are principally affected in suicides, and that this form of madness is chiefly accompanied by thickness of the skull, and its increased weight.

From these considerations it would be fair to conclude that by calm and extensive observation the number of cases of mental derangement from organic disease of the brain will be greatly diminished; and such, in fact, we find to be the case. Mons. Esquirol, the most celebrated physician on this subject in France, relates, that on inspecting the bodies of one hundred and sixty-eight melancholic patients, two had the brain harder than natural; four, organic disease of the substance of the brain; three, where cartilaginous bodies were found upon the falx; and five, where extravasation of blood had taken place into the cavities and in the substance of the brain.

But although the disturbance of the functions of the sensorium constitutes the disease, this disturbance may arise from that inexplicable connexion with distant parts which, for want of a clearer expression, has been termed sympathy. Hence physicians have sometimes been led to seek for the material cause of insanity in the viscera of the thorax or abdomen, the brain sympathising with the injured part, and its perceptions being altered.

The mutual sympathy between the heart and brain appears to be little understood. Acute diseases of the brain will occasionally arise and run their course with little or no perceptible disorder of the circulating system, while, on the other hand, repeated inflammations will attack and disorganize the heart without the functions of the brain being in any way impaired. There are, however, great exceptions to such observations. The commencement of acute carditis is often very obscure, and occasionally the first and most violent symptom has been maniacal delirium. It has occurred to me recently to see two cases in which the sympathy of the brain with the injured organ was very obvious: the first was that of a young gentleman who had suffered from repeated attacks of rheumatic pericarditis, during the last of which, his memory became impaired, his ideas were uniformly of the most melancholy nature, phantoms presented themselves to his imagination, and his mind was a prey to terror. The patient died, and the heart, as was expected, was found to be extensively disorganized, by the enlargement of its muscular parietes, and the deposition of repeated layers of lymph in the pericardium. Another case occurred in St. George's Hospital, under my care. The patient had suffered from acute rheumatism, and the heart had been attacked by rheumatic inflammation. About the

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period when he appeared to be convalescent, suddenly violent maniacal symptoms arose, attended with a prevailing fear that he was doomed to expiate, in prolonged tortures, crimes probably imaginary. Local depletion in the region of the heart, and the constant application of ice to the head, during many successive days, removed the symptoms, and the patient has been now during several months quite well.

Corvisart, in his beautiful work on diseases of the heart, adverts to the influence of the heart on the intellect, remarking that in the third period of aneurism of the heart, the patient is often attacked with furious delirium. It is probable, likewise, that some of the cases of insanity arising from perverted passions, disappointed affection, loss of friends, sudden diminution of worldly possession, or the spectacle of some unusual and appalling crime, may be intimately connected with the influence of such impressions on the circulation. It is notorious that, during the terrible scenes of the French revolution, organic diseases of the heart, as well as cases of aberration of mind, were wonderfully increased; and it is far from improbable that the diseases of the heart, brought on by long watching, frequent peril, and urgent anxiety, were productive, in their turn, of such an influence on the circulation in the brain as to alter its powers of perception. In advanced life,

there is no doubt that the influence of the diseased structure of the heart is the principal cause of the most frequent and most fatal of the diseases of the brain. Sanguineous apoplexy, if not in all, certainly in the majority of cases, arises from the increased size and force of the muscular parietes of the left side of the heart, impelling blood into the vessels of the brain, which vessels are rendered weak from steatomatous, or unyielding from bony deposits in their coats. In studying, then, the organic changes in the human body which produce alteration of the functions of the brain, it will not be sufficient to observe the condition of the brain alone—the state of the heart and great vessels must be carefully investigated; and these being found healthy, we still are not enabled to conclude that no local cause exists which may have excited sympathetic disturbance in the sensorium.

The third series of organic causes is to be found in the diseases of the abdominal viscera, between which and the functions of the brain, there is a wonderful sympathy. It is true that inflammation of the bowels will proceed rapidly, and terminate fatally, without involving sympathetically the intellectual functions; but, on the other hand, the degree in which these functions, and even the external senses, are disturbed, by the

diseased secretions of the stomach, liver, and small intestines, is manifest to every one. The severe and agonizing head-ache experienced by some patients, from the simple distention of the great intestines, is a familiar instance of this connexion.

In cases of melancholy or suicide, such considerations would carry our attention especially to the condition of the viscera of the abdomen, and accordingly we find great care has been taken by continental observers in investigating this condition. From their researches it would appear that certain peculiar appearances in the great intestine had struck, simultaneously, physicians in different countries, as presenting themselves in the bodies of melancholics. Greding, and other German physicians, appear to have noticed this change, but it was first made generally public by a memoir of Mons. Esquirol, published in 1818, on the subject of the displacement of the colon in madness; and it is to be observed, that this is the work of a very laborious and learned physician, possessed of the opportunities of more extensive observation on these subjects than any other physician in Europe.

Mons. Esquirol relates numerous cases in which the arch of the colon was found after death displaced; often low down in the pelvis, and

always in the hypogastric region. He expresses himself in the following words on the alteration in position.

This displacement cannot be attributed to a mechanical cause, dependant on the thickening of the parietes of the colon, or the accumulation of faecal matter in its interior, for in the greater number of subjects which I have opened, the colon was empty, and in all healthy. The same was the case with the ascending and descending portions of the colon, which by their action might have dragged down the transverse portion. Neither is this displacement the effect of the last disease of the patient, for the same appearance presented itself in the bodies of maniacs who died of different diseases.

It must be observed, that in the majority of cases related by Mons. Esquirol, where these appearances presented themselves, organic disease of the brain also existed. After the appearance of Mons. Esquirol's paper, the subject appears to have attracted the attention of the German physicians, and Bergman, especially, investigated the subject. Bergman relates numerous cases of the same appearance, but remarks, in addition, the frequent irregular contraction of this portion of the colon: other physicians have since made similar observations,

but none seem to have endeavoured to ascertain the fact whether similar irregular contractions and displacements of the great intestine are not frequently found in individuals who have never been affected at any period of their lives with aberration of intellect. The learned authors of these observations are of opinion that this peculiar condition of the lunatic may be distinguished during life by the presence of the following symptoms, and they are more particularly adverted to by Bergman. "The patients suffer a sensation of pulsation and undulation in the abdomen; this is particularly felt in the umbilical region. The belly is often hard, and externally different tumors are observed, which vary in shape and hardness: a certain degree of pain more or less severe is felt in the region of the arch of the colon. The region itself is tender, but the nearer the patient approaches to the state of fury, the tenderness becomes less. The position of the patient is inclined forwards; there is great anxiety about the præcordia; the skin has a bluish tint, and is very cold to the touch. These last symptoms Bergman considers to be characteristic of the disease. There is obstinate constipation; the fæces are hard; and nausea and vomiting are often present. Trembling is present; sometimes convulsions and epilepsy. These agitations principally occur when the patient is at stool. Insurmountable thirst and want of sleep harass the patient.

The mental derangement which accompanies these affections is of the chimerical kind ; he imagines he has frogs or serpents in his belly ; fantastic images and frightful dreams distress him ; he becomes first maniacal and then furiously mad. In this state the sensorium no longer perceives the local disturbance, which is indicated only by the inordinate movements of the limbs ; trembling, convulsions, tetanus, epilepsy, shivering, diarrhœa, and a difficulty of passing urine, immediately precede death."

As far as I can learn, this peculiar change in the great bowels has not been observed in this country, either at Bethlem or elsewhere ; but it is probable that in many instances the attention in dissection has been directed entirely to the condition of the brain. Esquirol states that in melancholia this alteration was observed in thirty-three out of one hundred and sixty-eight patients.

The very name of melancholia explains to us the ideas entertained by the ancients of its cause,—the stagnation of blood in the peculiar circulation of the bowels, the imperfection of the bile derived from this blood, and the consequent imperfect separation of chyle from excrementitious substances. In jaundice no doubt exists that the bile carried into the vessels occasionally produces mania, and often delirium, and such a symptom is greatly and justly dreaded by the physician : but such

cases are rare, and notwithstanding the general belief that melancholy especially depends on the congested state of the liver and spleen, or organic disease of these viscera, the proof is extremely difficult.

Fourcroy asserted that biliary concretions most frequently accompanied melancholy; but it is almost needless to remind those who hear me how very many cases present themselves where biliary calculi are found after death, without any mental disorder during life. The most violent case of the presence of biliary concretions which it ever occurred to me to witness, was unattended with the smallest disorder of the intellect; and, in this case, the gall bladder was filled by numerous and large concretions, so as to distend it to a considerable size, no liquid bile being found in it. In modern times, Cabanis, metaphysician as he was, looks to the derangements of the liver and spleen as the immediate cause of melancholy; Foderè has adopted the same view; and even Mons. Esquirol, evidently from practical considerations, leans to this explanation, and, without excluding other causes, attributes the greatest importance to the congestions of the abdominal viscera. "The change," says he, "from a dry summer to a wet autumn, is very favourable to the development of abdominal diseases, on which suicide so often depends:"

but the organic diseases of the liver, in such cases, were very few in his observation:—"Of one hundred and sixty-eight melancholics, only two had organic disease of the liver, whilst there were sixty-five cases with organic diseases of the lungs. Mons. Falret, one of the latest writers on the subject, believes that the disorders of the digestive organs are the consequence of the disease, as the passions of the mind are seen to influence the secretions of the abdominal viscera.

But the most evident causes for the disturbance of the functions of the brain, from sympathy with the disturbed functions of other parts, are found in the various changes which occur in the generative system. In women, from the commencement of puberty to the termination of that period when the uterus becomes unfit for its specific purposes, the brain is liable to be disturbed by every change, whether healthy or diseased, of the uterine system. In early life, when the catamenia first occur, at each returning month, in delicate girls principally, the mind is affected. If imperfectly established, great bodily pain, with violent headaches, arise; if the catamenia are profuse at an early age, quick and irregular action of the heart and arteries, faintings, fretfulness, and visionary alarms, and even epileptic fits, ensue. Some females are obliged at this period to seclude themselves entirely from the family; their minds being disturbed in

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every gradation from feelings of distress or discontent to absolute aberration of intellect. Who shall attempt to describe all the variations of spasmodic disease which attend this period of life? Sometimes the disturbance of the mind is shewn in the numerous forms of imposition attempted by the patient on the attending practitioner. Sometimes inordinate pains are complained of in the region of the bladder; and, if the disease be doubted, the patient will have recourse to some means, in her own idea conclusive, to convince all beholders: thus persons, at this period of life, have professed to have passed gravel, or sand, which, on examination, proved that it never could have been generated or contained in an animal body. At other times, inordinate vomiting is the symptom for which medical advice is required; and it has occurred to me, as it has doubtless to others, to find this incessant vomiting kept up by substances taken for the very purpose by the patient herself. Sometimes the patient cannot swallow; at other times she loathes food, and will exist on almost incredibly small quantities of it: and yet these patients have received an education which would make them shun falsehood on any other subject, and are of a rank in life where nothing was to be gained by pity, except that commiseration, attention, and astonishment, which excite and occupy the mind.

The mutual sympathy between the heart and brain appears to be little understood. Acute diseases of the brain will occasionally arise and run their course with little or no perceptible disorder of the circulating system, while, on the other hand, repeated inflammations will attack and disorganize the heart without the functions of the brain being in any way impaired. There are, however, great exceptions to such observations. The commencement of acute carditis is often very obscure, and occasionally the first and most violent symptom has been maniacal delirium. It has occurred to me recently to see two cases in which the sympathy of the brain with the injured organ was very obvious: the first was that of a young gentleman who had suffered from repeated attacks of rheumatic pericarditis, during the last of which, his memory became impaired, his ideas were uniformly of the most melancholy nature, phantoms presented themselves to his imagination, and his mind was a prey to terror. The patient died, and the heart, as was expected, was found to be extensively disorganized, by the enlargement of its muscular parietes, and the deposition of repeated layers of lymph in the pericardium. Another case occurred in St. George's Hospital, under my care. The patient had suffered from acute rheumatism, and the heart had been attacked by rheumatic inflammation. About the

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From these considerations it would be fair to conclude that by calm and extensive observation the number of cases of mental derangement from organic disease of the brain will be greatly diminished; and such, in fact, we find to be the case. Mons. Esquirol, the most celebrated physician on this subject in France, relates, that on inspecting the bodies of one hundred and sixty-eight melancholic patients, two had the brain harder than natural; four, organic disease of the substance of the brain; three, where cartilaginous bodies were found upon the falx; and five, where extravasation of blood had taken place into the cavities and in the substance of the brain.

But although the disturbance of the functions of the sensorium constitutes the disease, this disturbance may arise from that inexplicable connexion with distant parts which, for want of a clearer expression, has been termed sympathy. Hence physicians have sometimes been led to seek for the material cause of insanity in the viscera of the thorax or abdomen, the brain sympathising with the injured part, and its perceptions being altered.

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Instead, however, of this trembling delirium, the use of ardent spirits occasionally produces, where large quantities have been taken, furious mania, and this mania continues for several days after the period when intoxication has usually terminated. During this paroxysm the unhappy victim is to all intents and purposes mad ; often committing injuries on the persons of those near him, or menacing his own life. As often as the indulgence is repeated, so often is this dangerous condition renewed, until the safety of society requires that the maniac should be secluded. It is impossible to conceive, in any point of view, a more unhappy condition than that of the patient, when reason returns at the expiration of a few days, or at the utmost, weeks. The patient, perhaps a man in other respects of character and sensibility, finds himself in the possession of his senses and the companion of persons in every stage of insanity. Suppose the owner of the establishment desire his release, his friends urge it, or superior authority compel it. In, unfortunately, far the greater number of cases, he immediately reverts to his former habits, and is remanded to a place of security, under the same necessity for obviating mischief, and to awake to a consciousness of the same misery. Such cases are, unfortunately, too common, and no regulation, no law which has yet been adopted, approaches the case. If those in whose hands the supervision is placed refuse to

exercise their authority, to release the patient when in the avowed possession of his senses, there are many to exclaim against such barbarity. But let us reverse the case, and remember the responsibility which rests on the heads of those who release a man with the moral certainty that he will immediately place himself in a condition to injure, perhaps to murder, those around him.

One of the circumstances not the least remarkable in these cases, is the enormous quantity of ardent spirits which has often been consumed ere the condition alluded to has been the consequence, the bodily health of the patient still remaining unimpaired. There is a case in my remembrance, where the patient was in the habit, for many weeks, of drinking a quart of undiluted spirit (gin) daily, often a pint before breakfast, and yet this man was entirely free from bodily ailment: I have reason to suppose that this is far from being a single case.

The use of opium, carried to a great extent, appears to produce a similar effect to that of alcohol; exalting the sensibility of the brain, until, by long perseverance, exhaustion ensues. It occurred to me, when learning my profession at Edinburgh, to see a very remarkable instance of delirium tremens, from over indulgence in the use of opium. A tradesman, in a respectable

condition of life, finding his business decline, took refuge from care in the delightful sensations produced by opium ; by degrees he increased the quantity, until the dose amounted to two drachms of solid opium ; at length, from distress, he was reduced to extreme poverty, and unable to purchase a temporary solace for his misery. In this state he was brought into the infirmary ; his mind was disordered, and the bed shook under him from the violent and involuntary trembling of his limbs : a dose of opium relieved him, but the instant the effect wore off the same wretched state of mind and body returned. The cure was effected by gradually diminishing the quantity of opium at each dose, and by carefully preventing his leaving the hospital. After some months he recovered ; the humanity of his physician obtained him employment in his former business, and he gave his word (and happily had the fortitude to keep it) never again to take opium in any form. It occurred to me to know two years after that time that he was in a thriving and happy condition.

The influence of mercury on the human body appears to be most beneficially exerted when applied to an inflammatory condition of the system, and consequently to be ill adapted to diseased persons, who have been debilitated by bad diet, close application to study, or exhausting

fatigue; and even under the most favourable circumstances there are occasionally, but rarely, persons met with in whom this medicine proves a poison even in a minute quantity. Salivation in such persons is speedily produced, and with it delirium is excited: the feverish symptoms soon disappear, but the mental disease continues. The following is a case of this description, which occurred not long since to my friend Dr. Roupell and myself:—

A gentleman, about thirty years of age, habitually of mild disposition, and of clear and calm intellect, was, while much occupied in arduous professional duties, induced to rub in a large quantity of mercury for a syphilitic disease recently contracted. Violent delirium and salivation occurred nearly at the same time: the disturbance of his intellect suggested the idea of inflammation of the brain to those about him; while the exhibition of brandy, diffusible stimulants and opium, and the admission of cool air, by the order of Dr. Roupell, probably saved him from falling a prey to such mistaken pathology. By degrees he recovered, his mind, however, still remaining in an excitable state. He visited Paris during the tumultuary state of that capital in the autumn, and his perceptions speedily became again disturbed. He was obliged to be put under restraint. Little more was done for him

under this relapse, except insisting upon quiet, with air and exercise; and after about four months he completely recovered.

There is no doubt the mercurial action suddenly and rapidly excited was the immediate cause of this disease; and there is none on my mind, that his cure would have been perfect from the medical treatment in the first instance, had proper quiet been enforced.

There is one set more of causes, to which all writers, foreign or British, attach considerable weight: these are depraved habits in both sexes, contracted often at a period of life when either their criminal nature, or their unhappy and fatal consequences, cannot be estimated. I may be excused going further into the subject than by allusion to them; but they are, in fact, the frequent cause of mental derangement; and there is scarcely, in this city, a single asylum which does not contain some of the unhappy victims of this vice.

The late learned Dr. Beddoes was much struck with the prevalence of this dreadful habit in schools, and took great pains to warn the public of the fact. To his essays entitled "*Hygeia*," and published in the early period of the present century, I must refer, happy to escape the task

of dwelling upon a subject distressing to the best feelings of our nature.

The proportion of insane cases admitted into various large establishments, in which mania arise from bodily or physical causes, is small in proportion to those cases of insanity which appear to have been derived from the influence of moral agents.

In the accounts of physicians on the Continent, hereditary predisposition is reckoned among physical causes. Excluding these, we find the following calculations.

According to M. Esquirol, of 442 cases of mania, 121 arose from physical, 321 from moral causes.

The moral causes were in the following order :

Domestic affliction caused the greatest number.

Disappointed love.

Fear.

Poverty.

Reverses of fortune.

Jealousy.

Disappointed ambition.

Anger.

Excess of study.

Physical causes :

The greatest number after childbed.

From disordered menstruation.

Intoxication.

Exposure to heat.

Blows.

Depraved habits.

Mercury.

Fever.

Repressed eruptions.

Apoplexy.

In melancholy, 207 arose from moral causes ;
165 from physical causes.

And here again, by far the larger number from moral causes were those arising from domestic distress ; 2dly, from disappointed love ; 3dly, from reverses of fortune. Among the physical causes, as before, the largest proportion were after childbearing, or from disordered menstruation.

On the whole, in every variety of mania, Esquirol conceives that the moral are to the physical causes as four to one.

But the journals of other institutions by no means corroborate this estimate.

Casper states that of 1069 maniacs who en-

tered the Bicêtre during the years 1808-9-10-11-12 and 13, 536 cases arose from moral, and 553 from physical causes.

From the table of the maniacs in the Asylum at Waldheim, the cases from physical causes are in larger proportion than the moral, being as 116 to 53.

Very large allowances must be made for the accuracy of such statements; and they can at best be only considered as approximations to the truth.

At the next Lecture I shall endeavour to describe the remarkable symptoms of mania from moral causes; and point out some of the difficulties of diagnosis.

II.

IN my last lecture I endeavoured to lay before you, as far as my limits would allow, those causes of maniacal derangement which have been termed physical.

Those cases which are, or ought to be, remediable by the medical art, bear only a certain proportion, and not a large one, to cases of insanity derived from moral causes. Of these last, we have seen that by far the most frequent are domestic afflictions, loss of friends or domestic comforts, or that fortune which entails the loss of both. Jealousy, ambition, terror, and superstition—the vice of weak minds, likewise appear to be frequent causes of the malady which usurps the seat of reason.

The fact of these causes existing, a fact of daily observation, early drew the attention of physicians and philosophers to the immateriality of insanity. They could not attach to any specific lesion of structure such destruction of intellectual faculties ; they sought, therefore, to dis-

tinguish the effects by grouping together the principal symptoms, and assigning to each group a particular name.

The aberration of the intellect has been divided into three kinds; melancholy, named by continental authors, monomania; mania, the amentia of systematic writers; and idiotism or idiocy.

Monomania, in its various forms, comprises by far the greatest portion of the cases of insanity; and has been subdivided in the following manner:

1. All the moral faculties of the patient are absorbed in the design of injuring himself personally, or in the contemplation of supposed personal ailments. This is termed hypochondriasis, or *tædium vitæ*.

2. When monomania is accompanied with aversion to society, or even to the presence of the human species, it is called misanthropy.

3. Monomania presents often the disorder of the imagination which relates to change of person; the patient supposing he is the Saviour or the Deity, or that the soul of another person exists in his body.

Of this kind was the celebrated case at the Bicêtre at Paris, of the unhappy person who, terrified by the excesses of the French Revolution, imagined that he had suffered the stroke of the guillotine; and, on being summoned to the last judgment, had adapted another sufferer's head to his own trunk.

At the Asylum at Charenton, I visited a patient who had, for many years, been impressed with a conviction that he was the Apostle St. Peter. And it has happened to me to see a patient in London who has a no less certain conviction that he is the Saviour of the world.

4. At times, and, indeed, very frequently, the perverted imagination is filled with religious terror; and, of all the forms of monomania, all authorities agree that is the least susceptible of cure.

The predominating quality of these cases of derangement is terror—either fear of detection for some dreadful crime supposed to be committed; or of personal injury actually about to be perpetrated; or conspiracy for depriving the individual of certain rights or privileges, or the possession of property. Such cases would involve a very large proportion of persons under restraint,—perhaps two-thirds. Thus, cases are frequently

met with where the idea predominates that the patient has stolen something, or that a theft is to be imputed to him for the sake of punishing him capitally and wrongfully. At other times, and such a perversion of intellect is very common, the patient feels a conviction that all presented to him is poisoned. He will be conversing rationally, even eloquently, and with every appearance of perfect judgment ; but if food be brought, will refuse it suddenly, or break off his discourse to examine minutely every article, rubbing the salt between his fingers, as if suspicious of adulteration, or sipping the water, in hopes of detecting a perverted flavour.

Sometimes he commences a history of the attempts made by poison on his life, so correctly stated that, except to persons well acquainted with the facts, the order, regularity, and consistency of the tale would carry conviction of its truth.

Sometimes the morbid conviction is still more afflicting. It has occurred to me to see a patient who imagined that each evening he was assassinated by violent blows given him on the head ; and he shuddered as he told his tale. Oftentimes the first instance of mental derangement of this form is the hatred of some hitherto cherished

friend ; then comes the fear of conspiracy, which rapidly occupies exclusively the mind.

The second form of mental derangement is termed mania. This shews itself under forms wholly differing from monomania. Instead of a specific, fixed, and invariable object, mania extends over a multitude of different circumstances, connected with which are vague and incoherent ideas succeeding one another without order. Fantastic images present themselves to the imagination—sometimes gay, noisy, and violent, suddenly alternating with sad, melancholy, or horrible visions, regularity unlinked by associations, like the brilliant and fitful apparitions of a morning dream. In this form of madness, where all the faculties of perception appear exalted in intensity, the disease is termed dementia: where, on the contrary, the images presented to the sensorium are indistinct and slow, where perception may be considered to be diminished, it is termed amentia.

Idiotism, the third division of insanity, comprises those beings who have only an organic life, to whom existence is a blank, who have no relation with external objects ; who exist and grow as long as they are fed and tended, but who are devoid either of reason or instinct.

The vast change which takes place in the manner in which objects are presented to the mind, suggested to philosophers to examine and reason on the subject; and hence arose the metaphysical science of ideology or psychology. From the most ancient times philosophers have arisen, employed in speculating on, and endeavours to explain, our perception; but, unfortunately, like the philosopher who demanded more time to reflect on the nature of the Deity, the time which has elapsed has served rather to mystify than clear up the subject. Plato, Aristotle, Bacon, Locke, and Condillac, names which will live for ever, have all endeavoured to explain the nature of human reason, and the pre-existence of ideas in the sensorium, or that ideas were the result of sensation. Unhappily the perversion of ideas has thrown little light on the subject: it will not be necessary, therefore, to dilate on these points.

It is necessary, however, to consider the perversion of sensations in mental derangement, for these constitute a large portion of the external character of the disease. The sensorium judges under what may be called false representation. It has not yet been proved whether local injury, or disease of the external senses, are capable of producing mental aberration. A few cases would lead us to suppose the affirmative. Reil relates

the case of a lady who, in daylight, and with her eyes open, thought that spectres, of different forms and sizes, followed her everywhere. On one occasion, when hurrying to catch one of the imaginary phantoms, the nurse applied her hand over the eyes of the patient, and she immediately became rational. The disease returned on exposing the patient to a bright light.

The most imperfect of the external senses are those which we should expect to be the most frequently affected in mental derangement, and this we find to be the case. The sense of hearing is the one most liable to perversion, and indeed a considerable proportion of cases of mental delusion have reference to the perversion of this sense. Nothing is more common than to see a man, otherwise sensible, and with even powers for reasoning acutely, assert that he has communications with the invisible world ; that spirits whisper to him, warn him from injury, and counsel all his proceedings. At other times, animals copy his expressions or use abusive epithets ; at other times, his enemies employ tubes constructed on peculiar acoustic principles, to irritate or goad him into madness. There are many such cases as these, and they are very difficult to judge of, for the patient most carefully conceals this weak point of his imagination, until some accidental circumstance betray it. It occurred to me to see

a lady, related to persons who had suffered during many years from mental derangement: she was what is termed very nervous, easily disturbed by the slightest external impressions; her mind was affected on the subject of certain noises which she heard, but only with one ear. Swearing, and obscene impressions, with subjects which gave the patient the greatest possible distress, were communicated through the left ear: in other respects the patient was collected.

Memory is one of the most important functions—not to assert with Helvetius the most important function of the human intellect. It is the faculty which places us in relation with past events: it offers us objects recently seen, long past, and occasionally recalls circumstances long since forgotten. It is equally remarkable when studied in reference to mental derangement.

As the intellectual powers decay, it is well known that recent events vanish from the mind, while those which had occurred in the spring of our lives still remain fresh even in the twilight of our reason. In disease the alteration of this faculty is still more remarkable. It occurred about two years since at St. George's Hospital, that a patient affected with scarlatina was attacked, after the subsidence of the disease, with symptoms of effusion into the brain; the pupils

were dilated, the pulse irregular, and the patient completely comatose, the fæces and urine being passed irregularly. The use of venesection, mercury, and digitalis, restored the patient, but her powers of perception being returned, she was unable to recollect recent events, and singularly unable to express her ideas. By signs she could shew she knew the hour, when a watch was held before her, but she could not remember the words expressive of the hour; when better, all the recent events before her illness were still banished from her remembrance: she is still living and in good health.

In mental derangement the memory is either increased, diminished, or destroyed: in the monomania it is generally increased. In mania it varies from uncommon strength to great feebleness. Thus maniaes remember with great perfection all the circumstances attending violence or insult: in general, however, the ideas succeed one another with such rapidity—the impresions presented to the brain are in such number, and so rapid, that they leave slight traces behind them. It is very remarkable, however, that patients restored to reason often retain a wonderfully exact recollection of all which befell them during the period that their mental malady obliged them to be under restraint.

Of all cases which may be classed under disease, cases of monomania are often the most difficult to discover. The patient often most carefully conceals the subject on which his mind is perverted, and still more carefully, if he conceives it is the object of the inquirer to detect it. Hence the various opinions which are given in a court of justice on the existence of insanity. It has occurred to me to see several cases where the existence of insanity was doubtful, and where men of character, experience, and judgment, had formed various opinions on the subject. A gentleman, about forty years of age, was restrained in consequence of alleged insanity: it was impossible to detect from his manners or conversation, in repeated interviews, any aberration of intellect; at length, in a moment of confidence, he related his being tormented by sounds, whisperings, &c. during the day, and similar sounds conveyed by pipes under his bed at night; and very justly he reasoned on the conveyance of sound, the improvements by elastic tubes, and on the principles of acoustics: he was wrong only on the matter of fact.

This is a very good illustration of a case of monomania; and then commences a train of reasoning on the case, as to the inexpediency, the absolute cruelty, of confining a man, depriving him of his personal liberty, merely because he imagines he hears disagreeable noises; he rea-

soned apparently accurately on other subjects, and wrote not only correctly, but with singular facility and clearness.

On inquiry, there was reason to believe that this patient had made two attempts on his own life, and it would appear that such cases very frequently terminate in suicide; this, then, is the most convincing answer to the propriety which is questioned of seclusion. The following is an instance of this tendency. A lady of middle age was observed to have contracted suspicions that certain persons harboured malicious intentions towards her: the subject did not present itself frequently to her imagination, and in all other respects her mind was as usual, not very strong indeed, but not deviating in any way from her usual habits or modes of thinking: nobody thought of restraint, her prejudices exciting only disappointment, and some little surprise. In the middle of the night this patient suddenly rose, and threw herself into the area of the house where she resided; the fall broke both her legs, which were set under proper care, and she recovered her bodily injury. She remained, however, and I believe still remains, completely perverted in her mind. These cases, and they are merely illustrations of a class of cases, suggest the extreme caution which should be used in examining a patient previous to sanctioning the confinement. After frequently repeated

visits, during which the patient has displayed strong powers of reasoning, brilliant imagination, and great extent of learning, the merest accident will touch the train of perverted ideas, and the volubility of his insane expressions is perfectly astonishing. In cases of mania the intermissions, or lucid intervals, are most remarkable. A case was shewn me some years ago, at the retreat at York, of a person of the mildest and most inoffensive manners; and this condition was uninterrupted for several months at a time, when, suddenly, furious and destructive mania would ensue to so dangerous an extent that it would have been a fatal error to have caused the release of such a patient.

In cases of perverted mind, especially those unconnected with physical causes, moral management has always occupied the attention of physicians; and all persons appear to consider the first step towards recovery to consist in removing the patient from his accustomed home and habits. Such is the opinion of all persons, almost without exception, who have had much experience in the treatment of lunatics. Pinel is of opinion that the patient should be separated from every object which could remind him of the cause of his afflictions. He relates the following case: "A foreign merchant, become melancholic in consequence of deep distress, and

the loss of his fortune, was transferred to the Bicêtre. The re-establishment of his reason by moral treatment made rapid progress ; and I had repeated conversations with him without perceiving the least perversion in his ideas. But all was changed in a few days : he learned that his partners had appropriated to themselves a portion of his furniture ; and a woman had even the impudence to visit him, wearing some ornaments which he could not help recognizing as having belonged to him. He sighed deeply, fell into fearful melancholy ; which, by degrees, conducted him to violent and incurable mania." Notwithstanding this general opinion, it appears that cases may exist where a return to these very objects, about which the mind is apt to be confused, is attended with great benefit. No author, foreign or British, has placed this in so clear a point of view as the late Dr. Gooch ; and his opinion is extremely well expressed in his own words. " The last rule I have to mention," says Dr. Gooch, " relates to seclusion and control. There can be no doubt that it is generally necessary and useful to separate the patients from all those persons who are sources of excitement of any kind. This, however, can be effected only in one of two ways,---either in a separate house, or part of a house, where the patient has no other associates but her nurses ; or in a receptacle for the deranged, where she has no other associates

than her nurses, and persons similarly afflicted with herself. This is the only society she has, except the short and occasional visits of the physician. Thus the power of controlling her, even by force, is placed in the hands not of enlightened and benevolent persons, but of uneducated menials. I do not know how it can be otherwise, though I wish it could. There may be cases, or there may come a time, at which some interruption to this solitary life may be advisable. When the disease has lasted long—when the patient expresses a strong wish to see some near friend—when she entertains illusions which the sight of some may efface—the admission of such person is worth a trial. I shall be told, that when persons are mending, or have recovered, the most common cause of relapse is too early an introduction of friends, and too early a return home. When the patient is recovering, or has recovered, I do not recommend these measures: it is when the patient has not recovered, and is not recovering, that I advise them to be tried; when month after month passes without any amendment, and her mental delusions assume a shape accessible to moral impressions, then it is that I would advise an interview with a friend.” Dr. Gooch subjoins a case of great interest, illustrative of his views, but too long for our limits: I must refer to the interesting work in which it is contained. A note is likewise quoted, confirmatory of the opinion

entertained by Dr. Gooch, from Dr. Haslam : it is as follows :

“ It is my opinion that confinement is too indiscriminately recommended and persisted in. In many instances an intercourse with the world has dispelled those hallucinations which a protracted confinement would, in all probability, have added too and confirmed. In its passive state, insanity has often been known, if the expression be allowable, to wear off, by permitting the patient to enjoy his liberty, and return to his usual occupation and industrious habits.”

The greatest possible prudence is necessary in applying this particular kind of moral management, and it is only to very peculiar cases that such treatment is applicable. Perhaps there is no remedial process in any disease which requires so much firmness, mildness, and sagacity, as the proper regulation of moral restraint in cases of insanity.

The subject of restraint leads us to the next consideration, namely, coercion. The idea of bodily coercion is so painful to every feeling mind, that the very association of it in idea has made mania more terrible to the imagination of the world at large even than it really is. The uninstructed, associate stripes and straw as

the necessary lot of persons suffering under aberration ; and so aware are shrewd people of this strong feeling in the minds of the public, that whenever an uneducated man lays claim to the cure of insanity, he advertises that no corporal restraint is permitted under his system. Where feelings are concerned, mankind seldom take the trouble of reasoning accurately, or they would soon discover that there are cases in which restraint is absolutely necessary, especially among the lower classes ; and that without it, many of them would murder one another—(an unhappy instance of which recently occurred in St Luke's Hospital)—or destroy themselves. It is this strong, and predominant, and praiseworthy, but injudicious feeling, to which Dr. Heberden alluded a few years since, in his evidence before a Committee of the House of Peers. “ It is very easy,” says Dr. Heberden, “ to declaim on such subjects as cribs and straw ; but, in fact, if a person is in such a state of mental derangement as not to be attentive to the common calls of nature, cribs and straw are the most comfortable way in which he can be placed,—much better than a down bed, and all the curtains and apparatus of a fine bed-chamber. With reference to their confinement at night, those people that are in the worst state are confined by a manacle which goes round one wrist, and attached by a chain to one side of the crib ; the other side being high,

and there being no danger of their doing themselves any mischief: that is the general way in which they are confined, which is a confinement which does not lay them under any great difficulties."

The methods of coercion, in cases of violent mania, usually consist in a waistcoat, leathern gloves, or handcuffs made of polished iron. The first is perhaps preferable to the others, except in very violent cases, when it is speedily torn to pieces by the maniac. It is also very oppressive in warm weather, and occasionally irritates the sufferer to an extreme degree. The natural repugnance to the employment of irons, made me (the first time I witnessed it) regard with great dissatisfaction the use of handcuffs made of that metal; but I was speedily convinced, by extensive observation, that of all methods of restraint these were the least afflicting to the unhappy patients, the polish of the surfaces compensating for the distress of the pressure; while the gloves rubbed the wrists of the restless patients into sores, and the confinement of the waistcoats irritated and distressed them.

It is a very extreme and aggravated case which requires more coercive measures than those alluded to; and it must ever be borne in mind that these are only applicable to very severe

cases ; and such constitute a very small proportion of persons affected with the disease. Practical experience has long since exploded the horrible treatment of the disease itself by violence ; and it is not to be supposed that even the most enthusiastic admirer of the ancients will agree with the recommendation of Celsus on this subject,—a recommendation which, probably, has entailed more distress and affliction, and I may add bad practice, on mankind, than the Roman physician could possibly have foreseen. Speaking of the maniac, he says, “ *Ubi perperam aliquid dixit aut fecit, fame, vinculis, plagis, coercendus est.*” Unhappily, on this system of cruelty many institutions for the reception of lunatics were formerly conducted. It would appear that there is none, even in any remote portion of the civilized world at present, where such proceeding would not be held in just abhorrence.

That such a system existed at no very distant period in France, we learn on the authority of Pinel :

“ It was on analogous principles that a monastic institution of great renown, in the South of France, was conducted. One of the superintendents made every day the tour of the cells ; and, when a lunatic acted extravagantly, was boisterous, refused to go to bed, or to eat, &c., signi-

fied to him an order to alter his conduct; and warned him that his obstinacy in continuing such conduct would be punished the following day with ten stripes. The execution of the sentence was always punctual; and, if necessary, was frequently repeated. Nor was the superintendent more remiss in recompensing than in punishing; and if the lunatic was docile and submissive, he was permitted to take his food at the refectory, by the side of the governor, as if to give him a trial. If he forgot himself at table, or committed the smallest fault, he was instantly made aware of it by the stroke of a stick briskly applied to his fingers; and afterwards it was added, with calm dignity, that he had done wrong, and that he ought to be more careful.

Such a system was evidently an imitation of the methods of instruction which prevailed under the mistaken doctrine that cold and hardships were necessary to the health of the body, and stripes, oppression, and starvation, of infinite service to the rising intellect. These mistakes, it is to be hoped, are wholly abandoned, and such systems remain only objects of our pity and surprise. We shall quit their contemplation with relief, as we investigated them only to render the history of the treatment of insanity more complete, by recounting its errors as well as its advantages.

Of all the remedies applicable to disordered mind, arising from moral causes, employment and exercise are, perhaps, of the greatest importance. Persons who have devoted their lives to the investigation of the nature and treatment of mental diseases, are all agreed upon this subject. Mr. Finch, of Laverstock, was led to devise methods for employing the patients of a higher class in life, from observing that his pauper patients recovered in a greater proportion than those in a better situation of life, which he attributed to their being employed in the garden in working, digging, &c. Mr. Bakewell, of Spring Vale, in Staffordshire, expresses himself thus:—"I think the labour of lunatics might be made productive, and highly beneficial in point of cure: upon all occasions it is of the first consequence with respect to physical health. All that the power of medicine can do is to restore the body to its pristine state of health; the hallucinations of the mind are cured by employment, and diverting the thoughts."

Bodily exercise, however, is not equally applicable to all cases of mental derangement. Bodily exercise is preferable in monomania. All is inactive, except thought, among the greater number of those affected with this species of insanity. It is by distracting the mind that bodily exercise becomes a curative process. In addition to this, its physical effect is of great importance in melau-

choly: it promotes the circulation of the blood, which there is reason to believe moves more slowly than usual in such cases. This is more particularly applicable to the abdominal circulation: the system of the vena portæ appears to be especially inert in cases of mental derangement of this description, and by rendering, by means of exercise, the contractions of the abdominal muscles more frequent and powerful, a more healthy circulation is likely to be established in the viscera. In mania, bodily exercise is of the greatest importance during the lucid interval and the convalescence, and even during the paroxysm, if it can be contrived that the patient shall be strongly exercised, until some degree of weariness be produced: calm, tranquillity, and sleep, are not unfrequently the consequences. The affections of the mind have likewise been found of great service in the cure of melancholy. In the better class of society, especially among female patients, the tending of domestic animals, as rabbits, cats, dogs, pigeons, has been followed by a sensible amelioration of the disease of the mind. At the celebrated Quakers' Retreat, near York, I observed that these means were resorted to in great variety, and was informed, often with the most marked advantages.

I now pass to a part of the subject which has excited much attention and some discussion—viz.

the power which lunatics appear to possess of resisting extremes of temperature, and even epidemic diseases, and the suspension which the occurrence of acute diseases is said to occasion in the mental malady. Many remarkable cases have been related of the extreme degree of cold which maniacs endure sometimes, apparently from preference. The famous Theroine de Mericourt, who became maniacal during the violence of the French revolution, was in the habit, at the Salpetriere, where she was confined, of pouring a quantity of cold water into her bed ; almost always she poured it over the part where she lay, and constantly over the floor of her cell. It is stated by Monsieur Guislain, of Ghent, who is the author of a most learned and interesting work on maniacal diseases, that cases occur where even intense cold does not appear to alter the temperature of the surface : he adduces the following example :—

“ There exists at the hospital for lunatics at Ghent, an individual aged 50 years. He has been a maniac several years, and never ceases tearing in pieces his dress, so that he is almost always in a state of complete nudity. In the depth of winter the skin of this man is as warm and perspirable as if he were in a warm apartment : from palsy of the lower extremities he is incapable of exercising himself, but he never appears to suffer from

the cold." Notwithstanding such observations and examples, gangrene not unfrequently seizes the extremities when frostbitten, and the usual diseases of diarrhœa, and inflammatory affections of the thoracic viscera, not unfrequently attack maniacal patients. The best explanation of these apparently contradictory facts is to be found in the perverted mind of the patient; his limbs suffer, for their sensibility is probably not really altered from the natural condition. But the disordered mind perceives not the bodily ailment, or, to use the illustration of a foreign writer, a blister applied does not, perhaps, attract a momentary attention from the maniac, but it does not the less produce inflammation and suppuration.

One of the first persons who observed that patients affected with mental diseases were less likely to contract bodily ailments, and that severe bodily diseases were controled and mitigated, or suspended, on the invasion of insanity, was the celebrated Dr. Mead. Speaking of insanity, he says, "But what is principally to be wondered at in this disease, is, that not only those labouring under it are frequently preserved safe from other diseases, but when it attacks any one, it so occupies and lays hold of the patient that it not uncommonly expels and puts to flight the bodily infirmity, and that not a trifling malady, but those which are attended with great peril."

Other physicians have made the same remark, and it is an extremely rare occurrence for epidemic diseases to be found prevailing in lunatic asylums.

It occurred to me, when visiting, many years ago, the asylum for lunatics at Charenton, near Paris, to ask the superintendant, whether the presence of acute diseases suspended or altogether removed the mental distress. The answer was, that they had had many examples of it ; patients having become perfectly sane during a severe attack of fever, and some few appeared to have recovered their senses, others to have relapsed. Esquirol states that he has observed this salutary influence of the law, which seems to effect the suspension of a chronic by the presence of an acute disease. The occurrence of intermittent fever, especially of a quartan type, is considered by many observers of a particularly favourable nature. The following cases rest on the testimony of Monsieur Guislain, Physician to the Asylum for Lunatics at Ghent :—

M. Boatman, aged 40 years, of an athletic temperament, has been for several years at the hospital for lunatics at Ghent. He became maniacal in consequence of violent fright. One day an endeavour was made to seize his person, to impress him into the naval service, but he

fought with such spirit and success that he escaped from the gens d'armes. Some days afterwards he lost the use of his reason, and mania appeared: he was transferred to the asylum. The patient passed two years in that state, and was much feared by his companions in misfortune, on account of his great strength. At the end of this time, and in the early days of November, he was attacked with fever: the fever returned daily with great regularity, and with considerable violence, during two months. At the end of this time the febrile condition diminished, became irregular, and at length ceased completely. A sensible amelioration of the mind immediately followed. The patient became extremely docile; no violent passion was now remarked, still he was not perfectly sane—there still remained some incoherence of ideas; but if I may judge from the present state of the disease, his recovery will not be slow.

The next is the case where continued, or typhoid fever, produced a fortunate change in the mind of a maniac furiously mad.

A Prussian soldier received corporal punishment for a crime committed in his regiment, and from that time mental derangement ensued. He was transported to the military hospital at Ghent, where, after having been only disturbed

in his mind, he suddenly became furiously mad: he subsequently passed eighteen months in a condition completely passive, without the slightest emotion, and without the smallest inclination. An excessive fear was the predominant character of the disease. He was attacked with typhus fever. The period of invasion was soon passed, and was succeeded by an extreme prostration of strength: black tongue, sordes on the lips, livid countenance, involuntary dejections, meteorism, low delirium, and other symptoms of a similar character, marked the height of the malady.—Towards the twentieth day, the patient presented a more expressive countenance; he lay upon his side, and gave reasonable answers to questions for the first time. He inquired about his condition, the place where he found himself, and other circumstances which related to him; for some weeks the convalescence was complete, and he left the hospital without the smallest trace of mental disease. It is extremely difficult to reason on these very remarkable cases. With regard to intermittent fever, however, it may be doubted whether such attacks are true ague, or really symptoms of change in the nervous disease itself. Many organic diseases, and none more particularly than those of the brain, shew a tendency in their symptoms to become intermittent. Intermittent head-ache is often accompanied by noises in the head, and great trembling and distress; but such intermis-

sion is an encouraging circumstance, viewed in reference to the recovery of the patient. My own experience does not enable me to determine this question ; but I suggest it for the consideration of those who may have opportunities of observation, whether the intermission is not the result of a change in the sensibility of the brain, arising in the progress of cure, rather than a new disease, occupying the seat of a disease of a totally different kind. Such an explanation cannot, however, apply to the cases in which pulmonary consumption has been seen to be arrested by the presence of mania. Dr. Mead's case is one of the most striking examples, and I prefer it because the authority on which it rests is indisputable. He relates, that a young woman was attacked with hæmoptysis, for which she was repeatedly bled ; but, although the symptoms were relieved, the disease was not cured. In two months hectic fever supervened, with short cough, thirst, heat, and nocturnal sweats ; these were accompanied with great emaciation, and the excretion of puriform matter. True phthisis pulmonalis was present, and death at the very threshold. The patient was desirous of the offices of religion ; but it appears she was greatly alarmed by the vivid picture of punishment in another world for unrepentant sinners, presented to her view by the clergy ; at least Dr. Mead speaks of their conduct in no measured terms of disappro-

bation. The consequence was, that the unhappy patient became the victim of religious mania—by night and day demons and flames presented themselves to her imagination, and hell appeared open before her. From the invasion of this horrible mania, the symptoms of consumption began to decline, the febrile heat was diminished, the expectoration restrained, and the whole aspect of the disease was such, that the body appeared to grow more healthy just in proportion as the mental powers became more injured. A few days after the madness disappeared, the phthisical symptoms returned, and, in about three months, the patient expired. It has occurred to me, more than once, to see similar cases; and I more particularly remember one, where, during three months, the return of the maniacal symptoms was accompanied by an entire suppression of the expectoration, when a new vomica appeared to give way, and the patient's mind became clear and collected, without a trace of the delusion which had previously obscured it. Frank relates a case where the incidents occurred inversely. A lady, predisposed hereditarily to mania, presented all the symptoms of mental derangement, accompanied by sadness, and disgust for life—hæmoptysis ensued, and, at the same time, the intellectual trouble ceased. The two diseases succeeded one another a second time, and the patient was completely cured.

“ I am acquainted,” says Guislain, “ with a lady, æt. twenty-one, who, at the age of eighteen, experienced all the symptoms of phthisis, which proceeded rapidly. She had, from her form, a predisposition to that malady. She married, and became pregnant; but the symptoms of pulmonary consumption still continued. Soon after her delivery, mental derangement appeared, and all the symptoms of ulceration of the lungs subsided. The character of her mental disease was, chimerical melancholy. This state has continued two years, and there is not the slightest amelioration in the mental disease; for the other disease, the functions of the lungs, and other viscera, are healthy. One sister of this lady died of phthisis; another is actually in confinement.”— Notwithstanding these numerous and well-authenticated instances of a peculiar connexion between diseases of the brain and lungs, such examples must only be looked upon as very remarkable deviations from general rules, because I apprehend that very many cases of death by phthisis occur in lunatics, without the smallest alteration in the hallucinations of the patient. Esquirol noticed above sixty cases of pulmonary disease in the bodies of melancholic patients; and he no where observes that the progress of the one disease had been suspended by that of the other. There is, probably, some peculiarity in the circulation in the cases we have noticed, a

medical problem well worthy of solution: from the future attention of physicians, the careful observation of such phenomena may lead to vast improvements in our art—improvements which the mere observation of alterations of structure, explicable often on mechanical causes, will never supply.

It is well known to physicians, that acute rheumatism, and principally that form which attacks the joints, is transferred often to an internal organ, and sometimes this organ is the brain. It has not occurred to me to see any such example. At all events, the peculiar process which occurs is hidden from our view; but the fact rests on undoubted testimony. The converse, likewise, of the case sometimes occurs, maniacal disease disappearing under the occurrences of inflammation of the joints. The following is a remarkable case of this fact. “V.,* aged twenty-eight years, a robust man, very passionate, and of the greatest punctuality in the transaction of his business, became maniacal from grief. His wife, to whom he had been recently married, died, after a severe illness. In addition to his affliction, he felt her loss, as having assisted him materially in the transactions of his commerce; and it ended by his losing his senses.

* From M. Guislain.

His delirium became furious; he was obliged to be tied to the bed; there were constipation and very quick pulse, but his appetite was as usual; leeches were applied to the temples. These evacuations produced no remarkable change in his mind; the fury diminished; but the patient continued deprived of reason. This state had continued seven weeks, when, suddenly, the maniac complained of acute pain in the joint of the foot, and from this time his mind became more composed; the feet swelled, and the patient suffered extreme pain. A few days afterwards, the mental disease was completely cured. Since that period the individual has never suffered the smallest derangement of mind, and his bodily health has likewise been good."

Occasionally the mind is relieved by the appearance of a flux, as diarrhœa or hæmorrhoids; and the occurrence of cutaneous eruptions has also been said to be beneficial.

All these cases are, unhappily, few, compared with those in which no benefit is received from any such interposition of friendly disease. I proceed, then, to consider what art—strictly speaking, the exhibition of medicine, or remedies powerfully efficacious in other diseases, can do.

III.

THE application of medicine to mental disease must, of course, be directed, in the first instance, to the nature of the attack. It will become necessary carefully to inquire whether the brain is primarily or secondarily affected, and whether such affection is or is not connected with organic lesion. The physical causes must be carefully separated from the moral, and due weight assigned to each. If, on accurate inquiry, the patient has been exposed to causes sufficient to produce inflammation of the brain, and if redness of the countenance, injection of the conjunctiva, and heat of skin, very early in the disease, point out increased vascular action, with increased power, antiphlogistic remedies, with blood-letting, principally from the jugular vein, are to be employed; and in such cases, and probably only in such cases, mercury may be employed, to affect the system; such cases will often recover. In the summer of 1827, I had occasion to visit a gentleman, aged thirty, whom I found in the following condition. He was lying on a sofa, in a state of great agitation, and complaining that he had committed

some great crime, and was the object of a conspiracy. He complained of pain in the head, and would not permit me to feel the temperature of it. The pulse was quick and oppressed, and I recommended that he should lose blood. The first bleeding was borne very ill, but the second, to the amount of sixteen ounces, was attended with some relief. Cold was applied frequently to the head, and blood abstracted by cupping every day for several days, during which time he took calomel every four hours. As the mercury began to affect the mouth, a visible change in the mental malady came on; this gradually increased in the most favourable manner, and the patient entirely recovered, nor has he suffered the smallest relapse since that time. I had the advantage of the assistance of Mr. Tupper in this case. This case is only, however, an example of a few, where the mental disease is going on in consequence of increased vascular action; in the great majority of cases the functions of the brain, in mental derangement, are increased in force, while the circulation is depressed, extremely quick and feeble, and the action of the heart gives way at the smallest abstraction of blood; and yet these are often attended with raving delirium, great increase of muscular force, and are, in fact, what are termed *high* cases. The consequence of such practice, is either the more frequent returns of the high stage, or the patient sinks into one approaching idiocy.

“At the admission,” says Pinel, “of any lunatic into the hospital, great care is taken to interrogate the relations on the subject of blood-letting; and the question is asked, whether it has been employed, and what was the result? The replies the most constantly made attest that the condition of the lunatic has constantly become worse immediately after bleeding. I think I ought not to omit a curious fact, which occurred in the year 1813. Two young persons, of a similar age and temperament, arrived the same day; one of them had not been blooded, and her cure was effected in two months; a copious bleeding having been exhibited to the other, she was reduced to a kind of idiocy, and did not recover the use of speech until near the fifth month; her complete re-establishment was not effected until nine months. We saw afterwards a singular example of a melancholic patient, who had been bled five times from the foot and three times from the jugular vein, and had fallen afterwards into such a state of stupor and debility, that she passed several days without taking any nourishment.” Dr. Haslam informs us, that it is only in the very early stages of the disease that blood-letting is useful; and then he prefers cupping. It is also very remarkable, that, according to his testimony, the appearance of the buffy coat on the blood, generally considered to justify such practice, has been found often absent in cases

of lunacy where venesection has been used. In more than two hundred patients, male and female, who were let blood by venesection, there were only six whose blood could be termed sisy. The experience of Pinel is very decided against this practice.

The experience of any individual, however zealous, must be extremely limited; and I do not venture, therefore, to detain the College with the detail of my personal inquiries. I have endeavoured to obtain the result of medical practice on a large scale, and for this purpose selected Mr. Warburton's house, the White House on Bethnal Green, containing 400 patients, and where the skill of Mr. Beverley, the superintendant, and Mr. Phillips, the resident surgeon, emboldens me to offer to the consideration of the College facts which have resulted from their extensive and assiduous observation, which I could never hope to have obtained from any single private source. It is to these gentlemen I am indebted for the principal observations I am enabled to relate.

Messrs. Beverley and Phillips state the following as the result of their observations on this subject:—

“ The number of patients admitted with vas-

cular excitement, requiring blood-letting, are very few indeed ; we seldom or ever use the lancet in cases of excitement, if there is no evident effect upon the brain from increased arterial action, so as to lead us to fear an approaching attack of apoplexy or paralysis. The reason we do not use the lancet in cases without any such symptoms existing of disease going on in the brain, is, that we have done so in several instances, and the result was not favourable ; the patient became reduced from the loss of blood, and the excitement not abated ; the powers of the constitution gave way, the tongue became typhoid, and the patient sank into a state of collapse, and died."

As the result, then, of experience in cases of excitement, I presume that these arise from increased nervous energy, not depending on increased action of the heart and arteries, but on increased sensibility of the brain itself, and that blood-letting is not found useful.

Hence physicians have been under the necessity of seeking for means to allay the inordinately increased sensibility principally occurring in that division of insanity termed dementia. These remedies are various. I shall commence with cold, which may be administered in three ways—in the form of ice, in the shower-bath, and

in a column of water, graduated according to the strength of the patient, and termed the "douche," a French word, for which I know of no corresponding one in our language. Of ice to the head, not only in order to diminish vascular excitement, but also to produce a really sedative effect, a diminution of intensity of sensibility of the brain itself, I can speak with some confidence. In the epidemic typhus fever, which has recently raged among the lower classes in this town, and which has been of a marked and peculiar character, with scarcely any, if any, stage of excitement, the application of ice in the low maniacal delirium which accompanied it was attended with the happiest effects, and in more than one case appeared to be the principal means of cure; the patient sleeping quietly for hours under an ice cap, who, previously to the use of the remedy, had passed the night in low muttering delirium, or in the constant endeavour to leave his bed. This remedy appeared to me to be useful exactly in proportion as the delirium assumed the maniacal character. The torpor produced by extreme cold may convey a tolerably accurate idea of the modification which the extreme sensibility of the brain may receive from this remedy. The effect which pouring cold water on the head, in cases of affection of the brain with increased vascular action, produces, may be illustrated by the following very remark-

able case, which I attended with my friend, Dr. Roupell, physician to the Seaman's Hospital. A young medical man was attacked with symptoms of inflammation of the brain, while pursuing with great ardour his professional studies; and, being a medical man, he was, of all other persons, the most difficult to treat. Notwithstanding the intense pain in his head, and his quick and frequent pulse, he resisted remedies. Venesection he would not submit to, leeches he had an objection to, calomel he thought produced inflammation and ulceration of the mucous membrane of the intestinal canal;—it was proposed to pour cold water from a pitcher over his head; the consequence was diminution of pain, quiet sleep, and, in fact, so beneficial an effect, that the patient himself frequently called for a repetition of the remedy. I saw this patient several times, and the impression on my mind was, that to this remedy, and to this alone, he owed his life in that attack.

The shower bath appears to have a very similar effect in cases of early excitement, and I am enabled to quote a case of its benefit in mania, from the testimony of the gentlemen to whom I have alluded.

“ We have found, in some cases, the shower-bath of great service; but it appears to us, from the experience we have had of it, that it is more

beneficial in cases of a very violent nature, with increased vascular excitement, as we have given it a trial in cases of various descriptions, and in some without the slightest benefit."

"There was a case admitted into this Establishment, evidently a case that was completely cured by the use of it. A gentleman, aged 30, small, and of a light complexion, who had been studying hard, and constantly confined to one room, was attacked with furious mania; thought he had found out perpetual motion, and that he could make the sun stand still. Pulse very quick, 120, and small; pupils contracted; imagined he could reach any thing he saw, and grasped at them; incessantly talking; tongue furred and dry. We ordered him to go into the shower-bath. His extreme violence put us on our guard, that we got six keepers to take him there. We persuaded him, with much difficulty, to go in, by saying it was only a sentry-box. On hearing that, he immediately went; the door was closed and secured; the shock was so unexpected, that he screamed, and held his breath for a short time after the shock was over; then gasped, and knocked the sides and the door into pieces, and stepped out; but was immediately secured, rubbed dry, and put to bed. He had a little refreshing sleep during the night. In the morning he vowed vengeance against the doctors for murdering him.

We could not prevail upon him this day to go into the bath, which obliged us to confine and carry him there. He bore the shock better ; was taken out, rubbed, and put to bed. Slept better ; the tongue appeared cleaner, and he was not so violent. Bowels open ; he begged to be released from confinement, which was complied with. He took a little exercise ; we put him in the shower-bath almost without any difficulty ; sleep returned ; gave him a dose of calomel and colocynth ; more rational ; he inquired what had been the matter ; thought he had been asleep, and in the evening begged himself to go into the bath and have more medicine. From that time he became tranquil, took mild aperients, and was discharged well in a fortnight from the date of his admission."

" We have had several cases, nearly of the same nature, where the shower-bath in its results proved invaluable."

It is clear, therefore, from this statement, that it is to cases of dementia that it is applicable. I am not aware whether the douche is much employed in this country ; in the houses where I have inquired, I believe not. Pinel speaks of it in high terms ; and the power of graduation, so as not to give too violent a shock, allows of its employment in private.

The patient is put into the shower-bath, and I

give the detail of the process in the words of the author himself, M. Pinel :—

“ A happy combination of the douche with the bath adds greatly to its efficacy, and prevents even the smallest inconvenience which might arise from it. To each bath, and directly over the head of the maniac, is adapted a tube, so constructed as to let water fall three feet in height; the stream of water being proportioned to the end proposed, and graduated according to the symptoms; but in general the stream is very small. It is not until nearly the end of the bath, and during a few minutes, that the douche is administered; when the circulation of the blood has been drawn to the surface of the body, and is to be diminished towards the head by the cold produced. The douche is omitted as the disease begins to decline, and during the convalescence, but is resumed at the approach of an accession of mania, or when it has already broken forth. If the appearance of excitement be very moderate, the practice is confined to letting, drop by drop, cold water fall upon the head, which determines a moderate degree of cold, both by the impression of the liquid and the evaporation which takes place.”

The cold plunging bath, formerly so much recommended by Van Helmont, and in which the patient was half drowned, in the hope that this

short interval between life and death would put an end to the chain of perverted ideas, and that, with new life, the patient would recover new senses, is, as it would appear, not now employed, at least in this country.

As the use of cold in various forms appears to be productive, under proper management, of the greatest advantage in cases of mania, a corresponding good effect has been said often to be observed in the employment of the warm bath in cases of melancholia. I was informed at Charenton, in France, and the Quaker's retreat, near York, that more marked advantage was derived from the employment of the warm bath in cases of melancholy than from any known remedy in diseases of the mind; and Mr. Tuke states this opinion before the Committee of the House of Commons:—"The warm bath (he says) is used more medicinally than the cold bath; and it has been observed that the warm bath has been found very beneficial, particularly in female cases."—Dr. Guislain gives his very important testimony to the benefit of it, especially in cases where lunatics refuse nourishment. Like all other remedies, it is probably often of benefit, and occasionally fails. It appears likely to be more frequently advantageous when employed among foreigners, because from infancy warm baths are used, both as remedies and luxuries, and in either

view may become more necessary than to persons who have never been in the habit of employing them.

Producing discharges from the scalp, by means of blistering substances or escharotics, has been strongly recommended in chronic cases, both of mania and melancholy; and one of the greatest names which ever adorned the profession of physic has been brought forward in approbation of this practice. Dr. Jenner believed that he had cured cases of insanity by producing pustules on the scalp. A case was related to me, on good authority, where mania after continued fever was cured by this means twice repeated, the symptoms of mania entirely disappearing with the second crop of pustules. I have, of course, endeavoured to inquire whether such beneficial effects are at all frequent. "We have given this a trial, (say Messrs. Beverley and Phillips) more particularly with the tartar emetic ointment, and with, we thought, some advantage, in a few cases, but we found, from the constant restlessness of the patient, erysipelas came on from the friction against the pillow, so that we were obliged to abandon it. We afterwards tried it in several cases over the biceps humeri muscle with, I think, more benefit than on the head: these were cases of a very violent nature, stout robust habits, and who were, for

the most part, subject to periodical attacks. The use of it had evidently the effect of making the paroxysms of much shorter duration. We have also used blisters to the inside of the thighs, and calves of the legs, with advantage." The employment of tartar emetic internally may be directed on two principles, first to diminish the action of the heart and arteries, where these are excited by keeping the patient in a constant state of nausea; secondly, as an emetic in melancholy, where full and repeated vomiting is of great service in producing a more rapid circulation in the vessels of the abdomen, and relieving the viscera, already gorged with blood. The former application of the remedy appears most applicable to mania; the second to monomania, or melancholy. "Tartar emetic, in doses of one or two grains, given internally every hour, is worth noticing in patients who are subject to violent paroxysms, particularly those who have increased vascular excitement, with great restlessness. The patient generally complains of nausea without vomiting, becomes languid and quiet, rests better, appetite improves, and in a few days is trusted out of confinement."

In addition to these means of diminishing sensibility and irritability, others have been sought for from the class of sedative medicine, and of course from the use of the greatest blessing ever

accorded to mankind — opium. The opinions with regard to the use of opium in mania are very various, but may, I think, easily be explained. Where vascular excitement exists, together with increased sensibility of the brain, the restlessness is increased by the administration of opium ; where perverted perception arises from disorder of the functions of the abdominal viscera, the constipating effect of this medicine, and the manner in which it acts to diminish all the secretions, obviously renders it hurtful ; and it must be added, that in some constitutions it is poison. Hence it is far from generally useful even in the cases in which it is indicated ; and as it is often the case that physicians neglect medicines (after a time) which do not entirely fulfil their expectations, so occasionally this medicine has been unduly estimated, and immediately afterwards, as improperly neglected. In some instances mistaken pathology has lent its aid to undervalue the medicine, and one is forced occasionally to listen to theoretic doubts about its efficacy in cases of great and urgent irritability, from the prevalent opinion that all disease arises from inflammation, acute or subacute, and the corresponding error that opium necessarily occasions congestion in the brain. There is no question that where opium is not contra-indicated from peculiarity in the individual, or the presence of another disease to which it is ill-adapted, it is

of all others the remedy to diminish the sensibility and irritability of the system, to make the wretched forget his grief, the ruined his poverty, and even the criminal the mental retribution of his wickedness: and in the same way it often removes from the imagination of the maniac his supposed iniquities. Still partly the real, and partly the theoretical objections to this remedy, have caused physicians to seek for some substitute from the class of sedatives which would exhaust that increased sensibility which magnifies a hundred fold the objects presented to it.

It is now some years since the French chemists announced to the world that opium contained two substances, on which its peculiar properties depended. Narcotine, believed to possess the stimulant, and an alkaline substance, united with a peculiar acid, existing in opium under the name of meconate of Morphia, the alkaline body, morphia, being believed to possess all the soothing effects of opium without its stimulant properties. The morphia was found to unite in preference with the acetic acid, and under this form of acetate of morphia to be more soluble in water. It is remarkable that the combination of opium with vinegar has been particularly approved of by the celebrated Van Swieten* for

* Van Swieten says, that an accidental case first brought into notice the efficacy of this combination. A girl, who was maniacal, swallowed by mistake a scruple of opium mixed with vinegar: this mistake produced her cure.

the cure of this disease, and that vinegar, for what reason I cannot divine, has been considered very efficacious in the treatment of mania. Since the discovery of the French chemists, morphia has been very much employed; and if I may believe my own observation, and that of persons of very extensive experience in maniacal diseases, with most complete success. I have repeatedly administered it in disease where opium was ineffectual, from the headache and vomiting which accompanies its use, with the most decided benefit. I subjoin the following case, which recently occurred, and which proves the benefit of this medicine:—

A gentleman was attacked, some weeks after a most severe cough and cold, with great difficulty of breathing, attended with the impossibility of lying down at night, together with intermitting pulse and swelling of the legs, the heart and great vessels having become enlarged and dilated after the inflammation. The principal inconvenience in this case arose from the want of sleep, the patient never having been able to lie down during twenty-two nights. Opium, of course, was resorted to, and in very large doses, but the distress produced was so great that the patient preferred his sleepless nights to the dreams and scanty rest produced by this means. The patient came to London, and I recommended him the acetate of morphia, in the dose of three-

quarters of a grain. He slept well, and has repeated the medicine for several weeks, without its having once failed of the most complete success.

But it is to the subject of mania that this applies, and I have it in my power to lay before the College the most convincing proof of the efficacy of this medicine, an efficacy which in my mind renders it invaluable, and which I should not venture to praise so strongly had it not been corroborated by the extensive experience of the gentleman alluded to.

“ We have found the acetate of morphia useful both in the excited and the low form of insanity. We have also found it useful in cases of fixed delusions, but not of any great standing, and more useful in the low than the excited form of the disease. Of five cases of melancholy, three got well; the remaining two are certainly improving under the use of this medicine. Of five cases of excitement, two were discharged cured; one remains much improved; two received no benefit. It is necessary to observe that we have used this medicine in several cases without taking notes, and the result was similar to the two cases mentioned, that is, without benefit. It appeared to us that morphia did not produce the same good effect in excited as in other cases, unless

there was an occasional interval of reason. In the cases mentioned we have commenced with a fourth, and have not found it necessary to exceed half a grain. At present we have a patient taking half a grain dose every night with decided advantage, and we think the case very interesting, and proving the extraordinary effect of this medicine in cases of melancholy. A woman, of the age of 36, the mother of four children, was attacked with depression of spirits while pregnant of her last child. She did not feel the attack before she quickened, but immediately after she had a strong desire to destroy herself and children. This continued during pregnancy. After she was delivered she became worse, and attempted to commit suicide several times, and described her feelings, which is not common in such cases. She continued in this state, not fit to be trusted without a strict watch. She was sent here about two years ago; and what is extraordinary in her case is, that about noon all the feelings of desire of self-destruction left her. This occurred within the last three months, from which time they have remained the whole of the day. Various means were tried without effect. Our first idea, from the regularity of the attack, was to treat her as an intermittent, which failed. About a fortnight ago we gave her the morphia, beginning with a fourth of a grain, and gradually increasing it to half a grain; after taking the

second dose, one-third of a grain, she slept all night; in the morning was cheerful, without feeling the propensity to destroy herself. The third day she had a return, which lasted until noon; the dose was then increased to half a grain. The fourth morning she had not any return, and continued well until the fifth day after the half-grain dose was given, when she had a return from five o'clock in the morning until nine, a paroxysm three hours shorter than any of the preceding. She is now free from any desire of destroying herself."

The following is a case of the excited kind, in which this remedy was employed with advantage:—

"A. R. æt. 36, was admitted in February 1831, in a very high state of nervous excitement; she was a widow, and mother of four children. When admitted she was much excited, and constantly talking. Tongue dry; pulse very quick; skin moist. She was excited to such a degree that she tore the jacket and clothes to ribbons; refused her food; and would swallow nothing without force. She was ordered a pint of porter daily, with beef-tea and arrow-root. This diet was considered necessary, because if so much excitement continued without support she would fall into a state of collapse, and die. All our

efforts were unavailing in giving her food. We determined to try the morphia. The first night it had not the least effect; she was noisy, screaming until morning; on the following day refused her food, and the excitement was unabated; we got the porter and arrow-root swallowed with some difficulty; the morphia was increased to half a grain; did not make any noise during the night, and appeared to be drowsy in the morning; but when she was spoken to answered in a very incoherent way, and the excitement continued; the porter and beef-tea was given with less trouble; the medicine repeated; slept well during the night; appeared, on questioning her in the morning, to have a slight return of reason, such as to inquire where she was; took her food better; tongue moist; pulse not so quick, and bowels open. Ordered two pints of porter, beef-tea, and arrow-root, as usual. Medicine repeated at night; slept very well; more rational; began to cry; took her food much better; drank the porter, and appeared to relish it; the medicine was repeated every night until 6th of March, when she appeared perfectly well; the morphia was discontinued; she employed herself, and was discharged 14th April cured*."

* On inquiry, I find that the good effects of morphia still continue in cases in the White House. The muriate of morphia is now preferred, and is said to produce less nausea than the acetate.—Dose, gr. $\frac{1}{4}$.

The extract of the *hyoscyamus niger*, given in full doses, enjoys likewise on the continent of Europe a great reputation: it is the sedative which is preferred, and the fact of its being a mild purgative, has caused its employment by many practitioners in this country. It is believed to be less stimulating than opium; perhaps it is so; I am sure it is far less effectual as a sedative. The only English physician of great reputation who has spoken of its efficacy in diminishing the excitement of the brain in mania is Dr. Fothergill, who was of opinion that he had cured puerperal insanity by this medicine; the dose was five grains, three or four times daily.

The most powerful of all the class of vegetable sedatives is undoubtedly the belladonna. It is not to be wondered at, therefore, that it has been recommended for diminishing the sensibility and irritability of the brain in mania: it is not an opiate, but diminishes pain. This is the best explanation I can give of its effect. I have used it extensively in St. George's Hospital; and, as far as my practice would permit, in private life, and often with the most marked benefit. The following is one of the cases in which its alleviating powers were best observed:—A general officer was attacked, about fourteen years ago, with the painful affection of the second branch

of the fifth pair of nerves—*tic douloureux*. He underwent various remedies from the recommendation of the most celebrated physicians in London. The disease yielded to very large doses of belladonna, and it never reappeared for ten years. At the expiration of this time he had an apoplectic seizure, which left paralysis of the right side, very imperfect condition of speech, and frequent convulsive and painful affections of the nerves, sometimes choking, and at other times startings of the nerves of the affected limb, with occasionally the return of the *tic douloureux*. It is impossible to conceive more acute pain than is experienced by the patient at these times. He always (and I have witnessed at least ten such paroxysms) finds relief in the extract of belladonna. Half a grain is administered every four hours; and always when the third dose has had time to operate, the pains and spasmodic twitches disappear. It might be supposed that the pain terminated of itself, or that the spasmodic affection ceased naturally at this time; but, distressed at the weak state in which the belladonna leaves him, the patient has once or twice refused to take it, and he has suffered intense pain much longer than he otherwise would have done, being obliged to resort to the remedy at last.

Greting speaks highly of this medicine in epilepsy; and in one or two cases in the hospital

it has appeared to have rendered the intervals much longer, but I cannot lay claim to a single cure. It appears to me well worth the trial of physicians in mania, especially that which arises from moral causes, and is attended with pain and increased sensibility of the brain.

Various other substances from the class of sedatives have been adopted and relinquished alternately. The most powerful sedative with which I am acquainted—hydrocyanic acid, has not, I believe, been used in this country*. The unhappy consequences which followed its exhibition in Paris would deter physicians from any but the most cautious experiments with this medicine. It is, however, in my opinion, from this class of medicines that the greatest improvement will be derived in the treatment of disease of the mind. It requires that practical physicians should turn their attention to it; first discarding the idea which is hostile to all improvement—either that mania is incurable, or that it always, or even most frequently, depends on organic disease of the brain.

There is another powerful medicine whose

* Since writing the above, I learn that hydrocyanic acid has been employed by the late eminent Dr. Alderson, of Hull; and on the authority of Dr. Burrows, I learn by Dr. Balmanno, of Glasgow—it is said, with advantage.

efficacy cannot be explained in our present state of science—arsenic. It appears to alter the sensibility and irritability of the brain, and has long been known as very efficacious in intermittent diseases. I have used it several times, with great benefit, in cases of chronic pain in the head, trembling and sleeplessness, nearly allied to mania. A woman, æt 40, (servant to a lady in the Regent's Park,) was attacked with constant pain in the head, confusion, and giddiness, attended at times with loud noises, which she described like breaking stones; at other times images presented themselves to her mind, and her nights were entirely sleepless; pulse quick and weak. This condition continued for months, during which time I employed every means in my power for her relief; at length I resorted to the employment of arsenic. The patient took ten minims of the liquor arsenicalis twice daily, subsequently increased to the same quantity three times in the day. In about a week very great improvement had taken place; the pains had diminished, and the nights were tranquil. In a fortnight her ailments entirely left her.

The next was the case of John Graham, æt 30, admitted into St. George's Hospital, under my care, November 24th, 1830. The report on admission was as follows:—Ill since June last with pain in the forehead, diverging to each side, very

excruciating ; and reported to feel as if the head was forced or burst open. The pains are worse at night, so as entirely to prevent sleep. The pupils are dilated, and the conjunctivæ injected with blood ; sense of smell increased in acuteness ; bowels constipated ; pulse 100, very weak ; skin cold.

The bowels were ordered to be kept open, and sedative and antispasmodic medicines were employed without effect ; on the 6th of December he was ordered five minims of liquor arsenicalis twice in the day.

11th.—The pains were reported greatly relieved.

13th.—The pupils contracted naturally ; the pain and pressure in the head nearly gone, except when he lies down.

16th.—The medicine increased to five minims thrice daily : from this time the pains entirely disappeared. He remained in the house a fortnight, to see if any relapse took place, when he was dismissed free from ailment.

It has occurred to me to see several similar cases ; but these, perhaps, are as good examples as I could select of this peculiar effect in the me-

dicine; and I cannot but think it might, in proper hands, be very beneficially employed in some maniacal cases. Although I am quite aware that this medicine is similarly employed by many physicians in practice, yet I cannot learn that it has hitherto been tried in any of the numerous analogous, and more severe cases, which are found in lunatic asylums in this country.

In female cases, and especially those kinds which approach nearest to hysteria, the foetid gums and antispasmodic medicines have been principally used, and there can be no doubt that such means may tend very materially, by proper administration, towards a cure; but of all the diffusible stimulants which have been recommended, camphor has had a peculiar reputation. This was the remedy on which Dr. Perfect relied in the treatment of numerous cases of insanity. In 108 cases he conceives the patient derived essential benefit from it, and he administered it in the solid form. The following is one of these cases:—

Mrs. S. B., a married woman, became melancholic. Her complexion was pale, eyes red, tongue dry, pulse small, hard, and irregular. After bleeding and vomiting, Dr. Perfect ordered two scruples of camphor to be taken morning and evening. An eruption came out after this treatment all over

the body. The catamenia returned; nitre was added to the camphor, and the patient recovered completely.

Purgative medicines have been, from all antiquity, greatly praised in the treatment of mania, and above all, the helleborus niger. In our present state of knowledge there are many purgative medicines far preferable to this, although it is consecrated by centuries of experience. Moderate and frequently-repeated purging appears, as far as I can collect, to be very useful in monomania. One of the most advantageous discoveries in the modern art of medicine, has been the oil of croton, because there is scarcely any condition in which it cannot be administered, and very large doses of other medicines are required to fulfil the indication. I have repeatedly had occasion to administer this medicine in diseases of the brain, after blood-letting, in acute cases and in chronic cases, alternately with sedatives, and with the greatest possible good effect. Dr. Abercrombie affords, likewise, his powerful testimony in favour of the derivative, as well as purgative, effects of this medicine. A drop may advantageously be administered in a little jelly, which covers the acrid taste; when made into pills, it appears to lose, partially, its beneficial effects. Messrs. Beverley and Phillips have afforded me the following information on the curative treatment by purga-

tives in the White House :—"Purgatives are, we think, of the greatest importance. We have not tried long courses of drastic purgatives ; we have tried courses of mild purgatives in melancholy with advantage. There appears, almost always, a want of energy in the constitution of melancholic patients ; the circulation is languid ; the absorbent system sluggish ; there is a furred tongue and swelling of the legs,—in those cases we have found a course of laxative medicine, with gentle exercise, of great service. The exercise is generally enforced, as they will not comply without it, frequently requiring two assistants to take them by the arms, and oblige them to walk. The patient's health, by this means, improves, and the mind by other medicine, particularly the morphia, which we have given at this period with advantage."

The *oleum terebinthinæ*, a medicine combining purgative, anti-spasmodic, and stimulant properties, has been much employed in cases of hysteria, connected with epilepsy ; it has been recommended by Dr. Latham, senior, Dr. Thomas Young, and Dr. Percival ; and in the latter cases especially, by Dr. Pritchard, of Bristol. Nevertheless, it has never become an ordinary practice. I lately had the opportunity of seeing very decided effects from it, in a case—an outpatient of St. George's Hospital, æt. 15. The

patient had never menstruated, and was in a state very nearly approaching to idiocy, being unable to speak or take notice, except occasionally, when struck with the appearance of some glittering ornament, when she expressed her surprise by remarkable and violent gestures. The pulse was quick and weak; great pain in the head; skin cold. She was ordered two drachms of ol. terebinth, and the same quantity of castor oil, every morning, and in about a fortnight she recovered the use of her senses; but she remains in a weakly state of body, and the catamenia have not occurred. She is now able to take steel. I am inclined to think that great benefit may be derived from the employment of this medicine in similar cases, and such are not very uncommon.

The belief that cases of insanity always depend on organic causes, or a state of acute or subacute inflammation of the brain, has not only led to the erroneous treatment of many of these forms of disease, by venesection, but has suggested an antiphlogistic diet. We have, I think, the best evidence from the greatest experience in France and England, of the evil consequent on such practice. M. Pinel draws a terrible picture of the afflicting consequences of the short allowance on which the patients of the Bicêtre were placed in 1796; and it has been seen that a full diet, and even considerable quantities of stimu-

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subject of deep importance ; that all his experience should be brought to bear ; that all his faculties and observation should be concentrated in improving this portion of the medical art ; not by studying it exclusively, but in conjunction with the other diseases of the human body, and thus removing a great source of quackery and imposture. The educated physician is too often called upon to stand between the public and its prejudices : this must be done, not by deserting our colours, but by shewing that, with every desire to serve the public, neither rewards nor honours, nor fleeting popularity, can make us lend our countenance even to innocent imposture ; and that that independence, which is the distinguishing mark of an honourable profession, will support us through difficulties, and vindicate the integrity with which we practise that profession. If we carefully investigate disease, and neither resign that interesting and useful study to artful and designing persons, nor suffer ourselves to be overcome by the momentary prejudices of the world, all experience has shewn that medical practitioners so acting have received, and will continue to receive, the respect and homage of society.

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lants, are often productive of the utmost advantage in what are termed high cases. In the cases arising from child-bed, or during nursing, Dr. Gooch has very clearly demonstrated that these occur either in consequence of, or during, an exhausting process, and are relieved by tonic and antispasmodic medicines and restorative diet.

I have now spoken generally of the principal means of cure, from medicine, which may be adapted to mental disease; any improvement in treatment, and consequently any collection of facts, to serve as guides to future observers, must obviously depend on the judgment exercised in discriminating the causes, both moral and physical. The small bleedings, for instance, which would be useful in mania depending on chronic disease of the heart, and steatomatous or bony depositions in the smaller arteries of the brain, would be a fatal error in those frequent cases connected with hysteria; and the large evacuations and antiphlogistic treatment imperatively called for in inflammation of the membranes of the brain, would change mania into furious madness, by increasing the already excited morbid sensibility of the brain and nervous system. I hope, little as I have been able to say upon these subjects, that it is enough to prove that it is to the educated physician, to the man who is engaged in the constant discharge of the duties of his profession, that such cases should be made a

subject of deep importance ; that all his experience should be brought to bear ; that all his faculties and observation should be concentrated in improving this portion of the medical art ; not by studying it exclusively, but in conjunction with the other diseases of the human body, and thus removing a great source of quackery and imposture. The educated physician is too often called upon to stand between the public and its prejudices : this must be done, not by deserting our colours, but by shewing that, with every desire to serve the public, neither rewards nor honours, nor fleeting popularity, can make us lend our countenance even to innocent imposture ; and that that independence, which is the distinguishing mark of an honourable profession, will support us through difficulties, and vindicate the integrity with which we practise that profession. If we carefully investigate disease, and neither resign that interesting and useful study to artful and designing persons, nor suffer ourselves to be overcome by the momentary prejudices of the world, all experience has shewn that medical practitioners so acting have received, and will continue to receive, the respect and homage of society.

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